24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Stones' Phones	M M / D D / Y Y Y Y
Mailing Address 1309 F Street NW Suite 300	10 31 2012
Washington DC 20004	5930.00 nsaction ID : B443445
Purpose of Expenditure GOTV calls Category/ Type Office So	ought: House State: WI Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
Tammy Baldwin Check O	ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 133586.93 Disburse 2012	ment For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America	M M / D D / Y Y Y Y
Mailing Address 434 West 33rd Street	10 31 2012
	nount
City State Zip Code New York NY 10001	27.99 nsaction ID : B443446
Purpose of Expenditure List rental Category/ Type Office Sc	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Tammy Baldwin Check O	one: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ment For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5957.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date 10	29 2012
Signature	